(d) what ure Ifas reasons for omitting Ihe drugs from I'ne list;

(e) whelher his Ministry ascertained (lie reasons for tire omission so. what are ihe details thereof;

whether it is a fact that an expe it conunittee has been set up to identify drugs for category I;

(g) whether it is also a fact that t'ne list of Programmes have not provided to the committee: and

(h) if .so, the icasons thereof?

THE MINISTER OP HEALTH AND FAMILY WELFARE (SHRl MOTI LAL *VORA):* Cai and *(hi* Yes. Sir.

(c) and (d) The recommendations were made to the Department of Chemicals & Petrochemicals by Ministry of Health md Family Welfare in June/July(1987. Vaccines and Seia were not omitted frcm this list.

Ce) Dep.utment of Chemicals and Pet-lodiemicals has stated that Vaccines and Sera were omitted on the consideration that availability of the drag is more important than pnee.

(f) to (M Yes, Sir. A list of eleven identified National Health Programmes was piovided to the Expert Committee.

Diabetic Control Programme

536. SHRI ASHOK NATH VERMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government have not' communicated the name of diabetic control programme to the ex port committee for identification of drugs for category-I list;

(b) if so, what are the reasons therefor;

(c) wheher it is a fact that diabetes is one of thie causes whicii lead to blindness;

(d) whether it is also a fact that control of blindness is one of the National Health Programme; and

(e) if so, what are the bu-sis on whicii Government ha\c not advised to identify drug, for control of diabeties?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): fa) to fe) A list of eleven National Health Programmes identified for 'he purpose of categorisation of drugs undei Categoiy-I ot the Drags Prices Control Order, 1987: ^.is communicated to the Expert Committee. Control of Diabetes does not figure in this identified list of National Health Programme. In veiy few caies diabetes, manifesting as diabetic retinopathy can lead to blindness. It is a fact that control of Blindness is one of the National Health Programmes whereas Diabetes has not been identified as such.

Procurement of drugs for National Health' Programme

537. SHRI ASHOK NATH VERMA: Will the Ministej of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question 4206 given in the Rajya Sabha on 31st August, 1988 and state:

UI whether it is a fact that slates are P ocuiiny and distributing drugs needed for National Health Programme out of the funds provided by centre and states;

(b) whether it is also a fact that laige purchases of Bctaimait|hasone Dexame-thasone; Chloramphenicol Framycetin; Gentamycin and Polymixin eye preparations are made for National Health Programme by different states;

c) if so what is the quantity of each procured by each state during last three years, year-wise; and

(d) what are the basis on which these drugs have been excluded from the fe or Category-I?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): (a) Drugs for national health programmes are procured and distributed by the Central Government as well as the State Government.

(b) to (c) No such information is-availabk with the Ministry..

(d) Commonly used effective drugs used for control of blindness anj Tra choma were recommended for Price Control under Category-I of the Diug Price Control Orde^ 1987. A Conunit tee had been set up to review the listing Of drags under Catgory-I. The Committee has submitted its report on 8-11-88.

Use of Rfram?icin for Control of TB and Leprosy

538. SHRI ASHOK NATH VERMA: Will the Mmister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Rifampicin is used for control of TB and leprosy:

(b) whether it is a fact that TB nnd Leprosy are covered under National Heatlh Programmes;

(c) whether it is also a fact that as per policy announced in December 1986 drugs needed for National Health Programmes would form category-I of price control; and

(d) whether it is also a fact that his Ministry recommended for shifting Rif-ampicin for category-I to categpry-II

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): (a) to (;) Yes, Sir.

(d) A Committee of Experts was constituted to review the list of drugs which figure under category-I of drug price control order 1987 The proposal for I'e-oategorisation of Rifampicin was considered by that Committee. The Com-ₜniltee has submitted its report on 8-11-1988.

prugs banned by Maharashtra Government

539. SHRI ASHOK NATH VERMA: vVill the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news item which appeared in the Economic Times' dated 3rd November 1988 under the heading 'Maharashtra bans seven drugs;

(b) if so what are the names of the drugs found to be sub-standard along with the names of manufacturers;

(c) whether any penal action has been taken against them; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): (a) A news item had ap-peare'l in file 'Ecnomic Times' dated 3rd November 1988 under the heading erf Maharashtra bans seven drugs. Consequent to the Lentin Commission re-wrt the Maharashrra Government is reported not of standard quality and directs the manufacturers of these substandard drugs to stop its sale under the prugs & Cosmetic Act.

(b) to (d) A statement is annexed.

Statement

Name of Drug	Batch No.	Name of Manufacturer	Action taken
	2	3	
1. Dexameth.izone Tablet IP	0109	M/s. Bekay Pharmaceuti-c-lsTalujaDistrR-iigarh Maharashtra.	Show-cause notice for snspension'cncellition of licence issued